

Submission to the Victorian Law Reform Commission

MEDICINAL CANNABIS REFERENCE

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CANNABIS SAFETY ANALYSIS

There has never been a time in the world when people have been aware and trained in safety and risk assessment. There are more people than ever before trained to save a life, assess the risk to themselves and step in and save lives. There are people in all industries carrying out risk assessments on a daily basis or it could be for every job they carry out with the main consideration always being people's health and wellbeing. My son who is in high school started work experience this week and he had to complete a work place safety course before he could start.

Part of safety is being able to assess risks and when it comes to cannabis there is a growing trend backed by science where the public are assessing cannabis safer than alcohol, safer than caffeine, safer than Aspirin and a recent US poll showed that Americans believe cannabis is safer than sugar.

If the safety analysis we use as a benchmark is not based on the unbiased truth then any standards or regulations that we apply do not meet any minimum standard of safety and any comparison for efficacy cannot be considered with safety of the patient as the primary objective.

It can be assumed that most of the 2.5 million regular users of cannabis and 7 million that have tried cannabis in Australia have assessed cannabis as safe and if the government is assessing it as a danger, then in its legal relationship to the community it has a duty of care to educate the community the truth about the dangers because the current laws are presumed out of date and irrelevant.

Why do 70% of Australians believe cannabis is safe and 30% don't or aren't sure

Australians have been traveling in large numbers for a quarter of a century to places like Nepal, India, Morocco, Amsterdam and Spain where cannabis is mostly accepted in society and they mainly uses hashish, high THC resin as they have done in some places for centuries. Most

Australians travel to or know someone that has travelled to those places specifically for that reason and seeing first hand that life goes on as normal with cannabis in the society and the only crazies are the excited tourists. Australians have experienced firsthand that high amounts of THC in the community does not pose the risk that the ill-informed keep threatening is the impending danger to the community, as justification of their arguments to maintain criminalization of cannabis.

The internet allows people to access information at the palm of their hand and developments overseas like the recreational and medicinal laws in the US, The Uruguay government selling cannabis for less than the black market and with media reports of positive trends and outcomes around the world is validating and vindicating the risk assessment perceived by the community and confirming the discrimination against them is real.

Cannabis Safety Risk Assessment

Cannabinoids are the only real compound in cannabis that are in question and even though there are many, it's only three or four types that are found in substantial amounts that warrant any form of consideration and thousands of independent studies fail to show long term harm from the main cannabinoids would indicate the trace cannabinoids pose no threat.

For this example we can put them in to categories where they share the same safety and sub profile attributes. Please refer to the table below and the Cannabinoid Groups 1-4

1. THCA/CBDA/CBCA/CBGA (Raw cannabis Non Decarboxilated Cannabinoids)
2. CBD/CBC/CBG (Non Psychoactive decarboxilated Cannabinoids)
3. THC/CBN (Mild to no psychoactivity Cannabinoids Suppository)
4. THC/CBN (Psychoactive Cannabinoids Oral)

Risk Assessment tables next page:

Risk of Consumption Assessment Matrix

Risk is the combination of severity (impact) with the event probability (frequency).

The Risk Assessment Matrix is used to derive a Risk Indicator (RI) that must be used to quantitatively assess the risk of any substance being consumed

Risk Assessment Matrix

↓ Probability ↓ → Severity →	CATASTROPHIC (4)	CRITICAL (3)	MARGINAL (2)	NEGLIGIBLE (1)
↓ Substance ↓	HIGH (4A)	HIGH (3A)	HIGH (2A)	MEDIUM (1A)
FREQUENT (A)	HIGH (4B)	HIGH (3B)	MEDIUM (2B)	LOW (1B)
PROBABLE (B)	HIGH (4C)	HIGH (3C)	MEDIUM (2C)	LOW (1C)
OCCASIONAL (C)	HIGH (4D)	MEDIUM (3D)	LOW (2D)	LOW (1D)
REMOTE (D)	MEDIUM (4E)	LOW (3E)	LOW (2E)	LOW (1E)
IMPROBABLE (E)				

Risk Assessment

Risk →	Side Effects	Addictiveness	Long Term Harm	Fatality Risk/Toxicity	Risk Score Total
↓ Substance ↓					

Cannabinoid Group 1	LOW 1	LOW 1	LOW 1	LOW (1E)	4
Cannabinoid Group 2	LOW 1	LOW 1	LOW 1	LOW (1E)	4
Cannabinoid Group 3	MEDIUM 2	LOW 1	LOW 1	LOW (1E)	5
Cannabinoid Group 4	HIGH 2	MEDIUM 2	LOW 2	LOW (1E)	7
Caffeine	MEDIUM 2	MEDIUM 2	MEDIUM 2	HIGH (4C)	10
Aspirin	LOW 1	LOW 1	HIGH 3	HIGH (4C)	8
Cough syrup	MEDIUM 2	MEDIUM 2	MEDIUM 2	HIGH (4C)	10

Risk Assessment Summary

If the VLRC risk assessment does indeed show a lower risk of long term harm and risk of fatality in cannabis consumers and that cannabis products are safer than products sold in the supermarket and pharmacy, than the government needs to recognise that a special access scheme is not necessary and a total exaggeration of the perceived risk.

If the perception that cannabis is safe in the community is wrong then the VLRC has a duty of care to report to government and by providing a risk assessment so that the Government and the 2.5 million regular cannabis users can properly asses the health risk to themselves.

This may not been seen as a health concern that falls in to a special access scheme but the fact that it is at pandemic levels demands special attention.

Common sense Law

When it comes to common sense law you need look no further than the pharmacy or the supermarket. It's always an experience at the pharmacy, as you walk in the blinding light from the halo of the 3 saints hovering above the entrance gives you the reassurance that what you are buying is safe and of therapeutic or of medicinal nature. The supermarket is where families shop and we expect the highest safety standards for Australian families.

Caffeine products: Nodoz, caffeine powders, energy drinks etc,

There is no need to write on the label what a lethal dose is or the level of toxicity that you are consuming, common sense law presumes that the community are capable of assessing the risk in consuming a substance with relatively high toxicity.

Cough Syrup:

There is no need to write on the label what a lethal dose is or the level of toxicity that you are consuming, common sense law presumes that the community are capable of assessing the risk in consuming a substance with relatively high toxicity.

Asprin:

There is no need to write on the label what a lethal dose is or the level of toxicity that you are consuming, common sense law presumes that the community are capable of assessing the risk in consuming a substance with relatively high toxicity.

Alcohol: is used for therapeutic means and is sold in the supermarket. People use alcohol to relieve the stress of a long day, when they have experienced something traumatic or extremely stressful or to manage pain, the same reasons millions of people use cannabis. You only need be 18 and need no special access for this therapeutic product and comes in varying strengths and thousands of strains and flavours. There are few or no warnings on the bottle because common sense law deems the community capable of performing a risk assessment of all of the associated risks.

We all know that people die from consumption of these products annually and while cannabis that is sold should require regulation, we need to apply the same common sense law that we apply to other products otherwise we are continuing the unjustified discrimination against the millions of cannabis users forcing them to consider alternatives with higher toxicity that will negatively impact their health.

The Law and its impact to the health and wellbeing of the community

With of 2.5 Million regular users of cannabis and the 7 million people that have tried cannabis, there are millions of people in law, politics, medicine, trades and other professions and many people in the community that live in fear that if there current or past cannabis use is revealed, that their livelihood is in jeopardy, their standing in the community will be compromised and the potential of other discriminatory outcomes they will face.

This unnecessary duress for someone deemed capable of carrying out a risk assessment and that has carried out a risk assessment and found cannabis to be safe, in contradiction with a law that is clearly seen as invalid by the larger part of community because there is a lack of a current risk assessment. This duress that millions of people are experiencing may not fall under the guise of a special needs platform, but the fact that it is at pandemic levels affecting millions of people makes it warrant consideration for special attention and the VLRC has a duty of care to report on this in its findings.

As one Lady said at the Morwell consultations, "I don't want to have to deal with ice dealers to get cannabis". If a risk assessment determines cannabis as safe, then the 2.5million regular users of cannabis need protection from the elements of organized crime and ice dealers and that should be considered a need for special access that will also have a positive impact on the ice epidemic.

One thing is for sure regarding the outcome of the Governments changes in regulation, any shortcomings will be the blue print for the black market that will thrive once validations occurs and the negative impacts of organized crime will increase and law enforcement will need to escalate its indiscriminate eradication programme destroying the lives of many innocent people in the community along the way.

As the Hon Philip Cummins said at the Morwell consultation, “we don’t want any grey areas” and to do that we need to consider the entire cannabis questions, the laws are hurting the health and wellbeing of the entire community in many unforseen ways.

Community Expectation

I am hoping that the VLRC can show us a contextual risk assessment so that the Government, the community and medical professionals can have the confidence, that any asserted applications have the safety of the patient as the primary consideration and the millions of cannabis users can have the appropriate information to make the best decision for their health and wellbeing.